

## **Post Registration Standards Steering Group Held on 8 January 2020 at 23 Portland Place**

Attendees: Obi Amadi, Scott Binyon, Yinglen Butt, Clare Cable, Su Chantry, Richard Desir, Elizabeth Eades, Kerri Feeney, Liz Fenton, Jane Harris, Gillian Knight, Alison Leary, John Lee, Wendy Leighton, Carmel Lloyd, Angela McLernon, Mandy Murphy, Robert Nettleton, Wendy Nicholson, Donna O'Boyle, Crystal Oldman, Lola Oni.

NMC: David Foster (Chair), Geraldine Walters, Anne Trotter, Wonu Abdul, Liz Allcock, Chris Bell, Louise Clanfield, Suma Das, Peter Hudson, Sarah Kovach-Clark, Shonali Routray, Mary Tallant, Sue West.

Apologies: Jean White, Mark Radford, Paula Holt, Charlotte McArdle, Maggie Clark Rodney Morton, Stephen Griffiths, Susan Aitkenhead, Katerina Kolyva, Gill Walton, Jane Beach, Margaret Willcox & Nichola Ashby.

### **Meeting notes**

#### **Welcome and introductions (David Foster and Geraldine Walters)**

DF welcomed everyone to the meeting. It was clear from the previous meeting that 2 points had been agreed – that the status quo was not acceptable, and that the need to modernise in this area was clear. Now was the time to make progress and start moving this work forward. It had also become clear that there was a need to decouple discussions on SCPHNs and SPQs and that we could not treat them as a single entity.

Since the last meeting there had been a survey of group members and initial discussions with advocacy groups representing service users which would help inform our work. DF and GW had also met with officials at DHSC.

#### **Notes of previous meeting**

These were agreed with minor amendments regarding apologies provided for non-attendance at the previous meeting.

#### **Update (GW)**

GW provided an update on the current position and objectives for the day. The headlines from the independent review of our current standards had thrown up no real surprises, although there had been concerns raised about access to and availability/funding of post-registration generally.

Comments from the floor queried whether their out of date nature was the 'key concern' or the 'only concern' regarding the current standards. DF reminded those present of their need to actively contribute to the debate and to remember their role as a member of the group.

## **Survey (Anne Trotter)**

AT presented the results of the recent survey of group members. The response numbers were 'reasonable' and had for SPQs given clear indications as to a preferred way forward amongst those who responded – the position for SCPHNs was more mixed and less clear cut. Comments from the floor queried the nature of the survey. AT reiterated that the survey had merely been intended as a snapshot of views held by group members on particular issues at that moment in time.

GW restated the regulatory position with regard to what the NMC can and cannot do in this area in terms of having or not having standards, and the considerations the group should have in mind as a result.

## **SCPHN**

GW introduced a group session on the proposed way forward for the SCPHN standards, beginning with highlighting the number of those on our register who hold such qualifications.

Suma Das outlined the results of mapping exercises carried out by the NMC, highlighting the differences between the requirements of the new Future Nurse proficiencies and both the existing NMC SCPHN standards and the IHV SCPHN national curriculum.

DF commented that the headline to take away from this was that Future Nurse now exists and gives us a template not only for what a new registrant is capable of doing but also what above and beyond that should someone in advanced practice territory be capable of doing.

Comments from the floor highlighted that we should bear in mind that future nurse graduates would not start coming on stream until 2022 at the earliest, and that the new Future Midwife proficiencies should also be considered and mapped against as midwives can also become SCPHNs.

Attendees then broke out into group exercises, focusing on identifying the advantages and risks of 3 options. After a period of intense discussion and debate, feedback from the groups highlighted a broad consensus behind a hybrid of options 2 and 3, with support for a new set of standards that had a core element of proficiencies applicable to all SCPHN roles, with separate branches that focused on the skills required for each field of SCPHN practice.

## **SPQ**

GW introduced a second group session on the proposed way forward for the SPQ standards. She highlighted the outcomes of a recent evidence review carried out by the NMC, which had provided no definitive evidence to either support or dispute that standards in this area of practice should be regulated by the NMC. There had been evidence to indicate that regulation does offer some benefits in some sectors more generally, but this had to be seen in context.

SD outlined the results of further mapping exercises carried out by the NMC, highlighting the differences between the requirements of the new Future Nurse proficiencies and both the existing NMC SPQ standards and the QNI standards for community children's nursing, district nursing and general practice nursing.

Attendees then broke out into group exercises, again focusing on identifying the advantages and risks of 3 options. The group debates were passionate and in some cases did not produce agreement or consensus within individual groups. It was felt by many that no NMC standards for specialist community nursing should not necessarily mean no standards in this area at all, with the option of identifying and adopting standards produced by other organisations being one option that we should consider. The differing needs within different countries should be considered, with some expressing the view that some countries might want to address issues relating to post-registration practice using their own approaches without NMC intervention.

Some argued that community care is complex and risky, and becoming increasingly more so, which justifies an additional layer of standards and regulation by the NMC. Others however felt that any such risk is not resolved by the existence of NMC approved SPQs, and that the responsibility for managing such risks lay more properly with systems regulators or employers. Some comments also compared nursing with midwifery, where there are no such post-registration qualifications. The need for any such standards should be measured against PSA requirements regarding risk-based regulation.

Comments also highlighted the strongly held identity and affinity felt towards having the role and qualification recognised by the NMC through standards, and wondered what message withdrawing the annotation for these roles would send. There were also wider questions as to why some community roles were on part 3 of the register, some were annotations, and some were not recognised at all.

After all groups had fed back and a short period of further plenary discussion had occurred, a majority (but not unanimous) view emerged supporting a generic set of NMC standards for specialist community nursing, providing that this did not represent the final destination but was seen as a 'bridge' towards a more fundamental debate and decision on the NMC's role in the post-registration and advanced practice space as a whole.

DF commented that we did need to future proof whatever we put in place, which must be fluid and flexible. He also reiterated that the NMC must only regulate where it needs to because of risk – not to enhance the professional reputation of individuals or groups.

### **Next steps**

SCPHN – it is agreed that we will be developing new standards, identifying core knowledge and proficiencies that should form a generic hub, with bespoke field specific spokes. We will create sub-groups of subject matter experts to scope out what would be necessary content for these standards, which will report back to PRSSG.

SPQ – it is agreed that a set of 'bridging' generic standards for specialist community nursing will be developed because of ongoing issues with the current standards that

need to be addressed urgently. Again, a sub-group of subject matter experts will scope out necessary content and report back to PRSSG.

### **Communications update**

A newsletter and website pages about the work of PRSSG and the NMC's wider work in this area are currently under production and will be finalised shortly. A community of interest enquiries inbox is also now up and running to enable more people to engage in the ongoing debate in this area.

### **Next meeting**

A date for the next meeting will be set for some time in March 2020.

Chris Bell  
January 2020

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